



State of Utah

Department of Environmental Quality
Division of Air Quality
Lead-Based Paint Program
150 North 1950 West
P.O. Box 144820
Salt Lake City, Utah 84114-4820

UDEQ/DAQ Date Received Stamp Only

LEAD-BASED PAINT CERTIFICATION TEST APPLICATION

A. Applicant Information

Please complete all appropriate fields in this application. The Utah Department of Environmental Quality/Division of Air Quality (UDEQ/DAQ) will use this information to document and maintain a record of your Lead-Based Paint (LBP) certification test results. You may list one to three addresses (home address, mailing address, and/or business address), however, at least one of the addresses you list must be a street address (i.e. **not** a post office box). Green card number must be filled out only if you have a green card. Furnishing the information on this form is voluntary, however, failure to do so will affect the documentation and maintenance of your LBP Certification Test results. You will be asked to provide a current picture identification before taking the LBP Certification Test. Please complete this form by writing legibly (using blue or black ink only) or by using a typewriter/computer printer.

Name: _____
Last First Initial

Previous and/or Maiden Name(s), if applicable: _____

Home Address: _____
Street Address/P.O. Box City State Zip Code

Business Name: _____
Name

Business Address: _____
Street Address/P.O. Box City State Zip Code

Mailing Address: _____
(If different than business address above) Street Address/P.O. Box City State Zip Code

Home Phone # (_____) _____ - _____ Business Phone # (_____) _____ - _____ ext. _____

Fax # (_____) _____ - _____ E-mail Address: _____

Height _____ Weight _____ Eye Color _____ Hair Color _____
feet/inches pounds brown/blue/green/etc. black/brown/blond/etc.

Date of Birth _____ Social Security # ** _____ - _____ - _____ Green Card # _____
Month/Day/Year (If applicable)

Gender: Male Female Race/Ethnicity: _____
(circle one) (optional)

** Furnishing your Social Security Number (SSN) is voluntary, however, failure to do so will affect the maintenance of your LBP certification test results. If you choose not to provide your SSN, the UDEQ/DAQ will provide you with a nine-digit number so we can process your application. Please make a record of this nine-digit number and use it with all future UDEQ/DAQ LBP certification correspondence including all future certification and recertification applications.

B. Certification Statement

I hereby attest and affirm that the individual taking the LBP Certification Test and the individual identified in Section A of this application are the same person. I further attest and affirm that the information included on this application, including any attachments, is true and accurate to the best of my belief and knowledge. I acknowledge that any certification issued pursuant to this application, including any attachments, will be subject to revocation if issuance was based on incorrect or inadequate information that materially affected the decision to issue the certification. I also attest and affirm that I will maintain my certification(s) according to R307-840, Utah Administrative Code, follow the work practice standards outlined in the aforementioned Administrative Rule, and conduct lead-based paint activities only in those fields in which I have received certification.

Applicant's Signature

Date Signed

Applicant's Printed Name

Applicant's Title (if applicable)

Official Use Only

Applicants: Please do not write in this area

Official Use Only

Date application received _____

Picture ID type _____ ID# _____ Expiration date _____

UDEQ/DAQ photograph number _____

Test number: Inspector _____ Risk Assessor _____ Supervisor _____

Test results: _____

Additional Information: